## Issue Classification



| Application/Control No. | Applicant(s)/Patent Under Reexamination |  |  |  |  |  |  |  |
|-------------------------|---|--|--|--|--|--|--|--|
|                         |   |  |  |  |  |  |  |  |
| 10577072                | SEOL, JEE WOONG                         |  |  |  |  |  |  |  |
|                         | ,                                       |  |  |  |  |  |  |  |
| Examiner                | Art Unit                                |  |  |  |  |  |  |  |
|                         |   |  |  |  |  |  |  |  |
| TU X NGUYEN             | 2618                                    |  |  |  |  |  |  |  |
|                         |   |  |  |  |  |  |  |  |

| ORIGINAL       |     |            |           |           |      |         | INTERNATIONAL CLASSIFICATION |                     |  |  |   |  |             |  |  |  |
|----------------|-----|------------|-----------|-----------|------|---------|------------------------------|---------------------|--|--|---|--|-------------|--|--|--|
| CLASS SUBCLASS |     |            |           |           |      | CLAIMED |                              |                     |  |  |   |  | NON-CLAIMED |  |  |  |
| 455 69         |     |            |           | Н         | 0    | 4       | В                            | 1 / 00 (2006.01.01) |  |  |   |  |             |  |  |  |
|                | CF  | ROSS REF   | ERENCE(   | S)        |      |         |                              |                     |  |  |   |  |             |  |  |  |
| CLASS          | SUE | BCLASS (ON | E SUBCLAS | S PER BLO | OCK) |         |                              |                     |  |  |   |  |             |  |  |  |
| 455            | 522 |            |           |           |      |         |                              |                     |  |  |   |  |             |  |  |  |
|                |     |            |           |           |      |         |                              |                     |  |  | _ |  |             |  |  |  |
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|                |     |            |           |           |      |         |                              |                     |  |  |   |  |             |  |  |  |
|                |     |            |           |           |      |         |                              |                     |  |  |   |  |             |  |  |  |

|       | Claims re | numbere | d in the s | ame orde | r as prese | ented by a | pplicant | ☐ CPA ☐ T.D. ☐ R.1.47 |          |       |          |       |          |       |          |
|-------|-----------|---------|------------|----------|------------|------------|----------|-----------------------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original  | Final   | Original   | Final    | Original   | Final      | Original | Final                 | Original | Final | Original | Final | Original | Final | Original |
| 1     | 1         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
|       | 2         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
|       | 3         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
| 2     | 4         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
|       | 5         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
|       | 6         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
|       | 7         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
|       | 8         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
|       | 9         |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
| 3     | 10        |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
| 4     | 11        |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
| 5     | 12        |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
| 6     | 13        |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |
|       |           |         |            |          |            |            |          | _                     |          |       |          |       |          |       |          |
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|       |           |         |            |          |            |            |          |                       |          |       |          |       |          |       |          |

| NONE  | Total Claims Allowed: |                     |                   |  |  |
|---|-----------------------|---------------------|-------------------|--|--|
| (Assistant Examiner)                            | (Date)                | 6                   | 5                 |  |  |
| /TU X NGUYEN/<br>Primary Examiner.Art Unit 2618 | 2/27/09               | O.G. Print Claim(s) | O.G. Print Figure |  |  |
| (Primary Examiner)                              | (Date)                | 1                   | 2                 |  |  |